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Date: May 6, 2008

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MAY 06 2008

PATENT, TRADEMARK
AND COPYRIGHT LAW

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To: Examiner H. Philogene
Group Art Unit 2821, USPTO

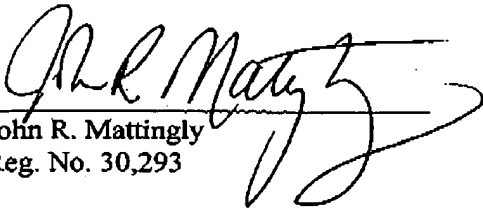
From: Mr. John R. Mattingly
MATTINGLY, STANGER, MALUR & BRUNDIDGE, P.C.

Re: USSN 10/582,631
Attorney Docket No.: KY-5317

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following listed documents are being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below:

**Transmittal; and
Amendment.**


John R. Mattingly
Reg. No. 30,293

May 6, 2008
Date

Total Number of Pages (including cover sheet): ____

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Form PTO-1083

Patent

In RE application of Y. SHIMADA et al

Case Docket No. KY-5317

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Serial No.: 10/582,631

Group Art Unit: 2821

MAY 06 2008For: ORGANIC EL DRIVE CIRCUIT AND
ORGANIC EL DISPLAY DEVICE

Examiner: H. Philogene

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity of this application under 37 CFR 1.9 and 1.27 has been established by a verified statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.
- ☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra
Total		Minus	**	=
Indep.		Minus	***	=

☐ First presentation of Multiple Dependent Claims

SMALL ENTITY	
Rate	Additional Fee
X 25	\$
X 100	\$
X 180	\$
Total	\$

OR

OTHER THAN A SMALL ENTITY	
Rate	Additional Fee
X 50	\$
X 200	\$
X 360	\$
Total	\$

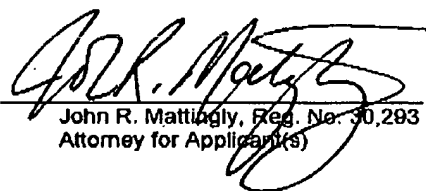
OR

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in col. 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-1417 in the amount of \$_____.
- ☐ A Credit Card Payment Form in the amount of \$_____ is attached for
- ☐ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayments to Deposit Account No. 50-1417.
- ☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR 1.17.
- ☒ Any Extension of Time fees that are necessary, which are hereby requested if necessary.

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By:


John R. Mattingly, Reg. No. 30,293
Attorney for Applicant(s)

Date: May 6, 2008

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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MAY 06 2008

Serial No. : 10/582,631
Applicant : Yuji SHIMADA et al
Filed : June 12, 2006
Title : ORGANIC EL DRIVE CIRCUIT AND
ORGANIC EL DISPLAY DEVICE
Art Unit : 2821
Examiner : H. Philogene
Docket No. : KY-5317

Customer No.: 24956

Commissioner for Patents
Mail Stop: Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated February 6, 2008, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.